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CONFIRMATION NO. 7545

<b>SERIAL NUMBER</b> 09/288,475	<b>FILING OR 371(c) DATE</b> 04/08/1999 <b>RULE</b>	<b>CLASS</b> 709	<b>GROUP ART UNIT</b> 2143	<b>ATTORNEY DOCKET NO.</b> OPTVP002
<b>APPLICANTS</b> JOEL ZDEPSKI, MOUNTAIN VIEW, CA;  <b>** CONTINUING DATA *****</b> This appln claims benefit of 60/081,095 04/08/1998 and claims benefit of 60/081,046 04/08/1998  <b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 04/30/1999</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged Examiner's Signature _____ Initials _____		<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 12	<b>TOTAL CLAIMS</b> 19
<b>INDEPENDENT CLAIMS</b> 5				
<b>ADDRESS</b> Schwegman, Lundberg, Woessner & Kluth, P.A. Silicon Valley Office 99 Almaden Blvd. Suite 520 San Jose , CA 95113				
<b>TITLE</b> SYSTEM AND METHOD FOR ONE TOUCH E-MAIL REPLY				
<b>FILING FEE RECEIVED</b> 1064	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	